Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

	(1)		(2) Annual Premium	(3) Percent
	Coverage	-	Volume (Illinois) *	Change (+or-) **
	utomobile Liability P	rivate		
	assenger 	-	······································	
	ommercial			
	utomobile Physical [amag		
	rivate Passenger	-		
	ommercial			
	ability Other Than A	uto _		MINISTER HANDERS AND
	urglary and Theft	-		
-	lass	-		***************************************
	delity	-		***************************************
	urety	740		
	oiler and Machinery	_		
Fi		-		
	ktended Coverage	-		
	land Marine	_		And the second s
	omeowners	_		
	ommercial Multi-Peri		**************************************	
	rop Hail			
U	ther Motorcycle		63,134	1.5%
	Line of Insuran	ce		
		to certain	territory (territories)	or certain
	lasses? If so,	No		
Sp	pecify:	No		
	rinf description of fil	/1£ £1:.		
	rier description or illi rganization, specify	19. (11 HIII	ng follows rates of an	advisory
	rganization):		We have revised our to	erritory factors and vehicle age factor
	omprehensive and Collision	haee ratee h		intory ractors and verticle age factor
-			ing while driving" were added	as major violations
	Adjusted to reflect all			ao major violations.
市市	Change in Company			sult from application of nev
ra	ites.		ACUITY, A Muti	ual Insurance Company
				lame of Company
			Regulatory Filing	, ,
				Official – Title

SUBSTITUTE FORM (RF-3)

SUMMARY SHEET

Auto-Owners Insurance Company

Change in rate level produced by rate revisions effective March 14, 2014 for New Business and May 13, 2014 for Renewal Business.

•	(2) Annual Premium	(3) Percentage
<u>Coverage</u>	Volume (Illinois) ¹	
15. Other: Personal Farmowners	\$9,263,356 (est.)	+6.0% (est.)

This filing applies to Farmowners policies in the State of Illinois.

The following is a description of all changes affecting rates with this filing:

Modify Base Rates, Minimum Premiums, Paid Loss Surcharge, Age of Insured Relativities, Amount of Insurance Relativities, Protection Class Relativities, Territory Relativities, Age of Construction Discount, Deductible Relativities, Custom Insurance Score Relativities, Earthquake Rates, Replacement Cost Household Personal Property Rates, Claim Free Discount, Experience Discount, Coverage G Rates, Coverage H Rates,

Introduce Wind/Hail Deductible Options.

Introduce loss settlement Actual Cash Value Roof relativities.

Introduce a cosmetic damage discount for a total discount of 20% for farm outbuildings and grain bins, 12% for metal roof material, and 8% for all steel or metal/pole siding construction.

Introduce an ACV roof discount in Select-O-Pak for roofs over 15 years old.

¹Adjusted to reflect all prior rate changes.

²Change in premium level which will result from application of new rates.

<u>Auto-Owners Insurance Company</u> Name of Company

Official - Title

Ing Smith-Administrator, Farm Actuarial

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	·	
Passenger		
Commercial		
Automobile Physical Dama	G	
Private Passenger	3	
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		·····
Homeowners		****
Commercial Multi-Peril		
Crop Hail		
Other CMP - Liability	468,854	-7.2%
Line of Insurance		
	ertain territory (territories) or	certain
Classes? If so,		
specify: No.		
Duinf description of filing (If filling fallows yet as of an a	duia a a .
Organization, specify	If filing follows rates of an a	avisory
organization):	We are filing to adopt ISO	reference filing
GL-2013-BGL1 and to change our lo		Telefolio ming
CE-2010 DOET and to onlying our to	33 COSC ITIMILIPIIOT.	
*Adjusted to reflect all prior	rate changes.	
	emium level which will resul	lt from application of ne
rates.		• •
	Florists' Mutual Ins	urance Company
	Nai	me of Company
	Andrea Coalson, Ad	ctuarial Analyst
		Official - Title

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| (1) | (2)
Annual Premium | (3)
Percent |
|---|-----------------------------|------------------|
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | | • |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other Businessowners | \$2,665,829 | 0.016% |
| Life of Insurance | | |
| Dana filina and a saulu ta assta | | |
| Does filing only apply to certa Classes? If so, | iin terntory (terntories) o | rcenain |
| , | se see Cover Letter. | |
| specify: No, plea | ise see Cover Letter. | |
| Brief description of filing. (If f | iling follows rates of an a | advisory |
| Organization, specify | ang ronomo ratos or arr t | 20 1.00. y |
| organization): | Please see Cover Letter. | |

Frankenmuth Mutual Insurance Company
Name of Company
Glen Gerwatowski, Product Analyst I
Official – Title

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

| revision effective $\frac{07}{100}$ | 01/2014 | • |
|--|---|------------------------------|
| (1) | (2) | (3) |
| Coverage | Annual Premium
Volume (Illinois)* | Percent
Change (+ or -)** |
| <u>Coverage</u> | volume (IIIImois) | Change (+ Oi) |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage
Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other Commercial Property | 3,677,692 | -0.2% |
| Line of Insurance | | |
| Does filing only apply to cert If so, specify: | ain territory (territories)or | certain classes? |
| Brief description of filing. | (If filing follows rates of a | an advisory |
| organization, specify organiza | | |
| | Revise the Equipment
Mine Subsidence Rate: | t Breakdown rates and |
| | Mine Subsidence Rate | S . |
| * Adjusted to reflect all pri | or rate changes. | |
| ** Change in Company's premium | | |
| result from application of | | |
| | | |
| | Crinnell Mutual Daineum | and Company |
| | Grinnell Mutual Reinsur Name of Compa | |
| | Name of compa | y |
| | | |
| | | |
| | man 7/2 12 | S. |
| | Many Wands | To the same |
| | ~ | Actuary |
| | Official - Tit | -le |

H29219D

| Change in Company's revision effective | - | rate level | produced | by | rate |
|--|------------|------------|----------|----|------|
| (1) | 0770172014 | (2) | | • | |

| (1) | (2)
Annual Premium | (3)
Percent |
|---|---------------------------------------|--------------------|
| Coverage | Volume (Illinois) * | Change (+ or -) ** |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger
Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | · · · · · · · · · · · · · · · · · · · | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | 4,104,645 | -3.0% |
| 15. Other Businessowners Line of Insurance | 4,104,645 | -5.0% |
| If so, specify: Brief description of filing. (If organization, specify organization) | filing follows rates of a | |
| | Revise the Equipment | Breakdown rates. |
| * Adjusted to reflect all prior r
** Change in Company's premium lev
result from application of new | vel which will | |
| | Grinnell Mutual Reinsura | |
| | Name of Compa | ny |
| | | |
| | | |
| | Many Wands | 0 |
| | Official - Tit | Actuary |
| *2.001.0D | Official - IIC | .10 |

| Change in Company's premiu | m or rate level produced b | y rate |
|---|---------------------------------------|---------------------|
| revision effective <u>July 1</u> | , 2014 | |
| (1) | (2) | (3) |
| | Annual Premium | Percent |
| <u>Coverage</u> | <pre>Volume (Illinois)*</pre> | Change $(+ or -)**$ |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | · · · · · · · · · · · · · · · · · · · | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | · | |
| 5. Glass | • | |
| 6. Fidelity | | |
| 7. Suretý | | |
| 8. Boiler and Machinery | | |
| 9. Fire | <u> </u> | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | - 100 100 | 10.50 |
| 15. Other Farm Equipment Breakdown | \$ 133,160 | -19.5% |
| Line of Insurance | | |
| Bine of Indulance | | |
| D | h | |
| Does filing only apply to certain If so, specify: No. | - | certain classes? |
| ii so, specify. No. | , | |
| | · | |
| | | |
| Brief description of filing. (If | filing follows rates of a | n advisory |
| | | 4 |
| Dermanding votes vanging from 12 | % to 22% Orrerall impact | ic 10 5% |
| Decreasing rates ranging from -12 | 8 to -22%. Overall impact | 15 -19.5% |
| | | |
| | | |
| * Adjusted to reflect all prior : | rate changes. | |
| ** Change in Company's premium le | | |
| result from application of new | | |
| | | |
| | | _ |
| | Grinnell Mutual Reinsura | |
| | Name of Compan | У |
| | | |
| | | |
| | Ryan Schave - A | ctuary |
| | Official - Tit | |
| | | |

H29219D

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level | produced by rate revision effective | 01/15/2014 |
|---|--|--|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| Automobile Liability Private | | |
| Passenger Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| - | | |
| 5. Glass
6. Fidelity | | |
| 7 Surety | | |
| 8 Roller and Machinery | | |
| n Eiro | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Kidnap & Ransom Liab</u> | \$52,784 | 4.4 |
| Line of Insurance | | |
| Does filing only apply to certain territory (terr | itories) or certain classes? If so, specify | · No |
| boes liming only apply to certain territory (terr | nones, or certain classes: if so, specify | . 110 |
| | | |
| Brief description of filing. (If filing follows rate
The Company is making revisions to their Kf | | · / |
| The Company is making revisions to their Kr | RE program. | |
| | | |
| Adjusted to reflect all prior rate changes. | | |
| **Change in Company's premium level which | will result from application of new rates | 5. |
| | | |
| | | surance Underwriters Inc, |
| | | Name of Company |
| | 1 | an VD & Director of County in a 110 |
| | Joseph Hobbs/Senic | or VP & Director of Compliance - US Official - Title |
| | | |

| Change in Company's premium or rate level produc | eed by rate revision effective | January 31, 2014 |
|---|--|--|
| (1) | (3) | (2) |
| (1) | (2)
Annual Premium | (3) |
| 0 | | Percent |
| Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | ************************************** |
| 8. Boiler and Machinery | | ************************************** |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | - | |
| 15. Other - Accountants | \$37,000 | -4.40% |
| Line of Insurance | (1) | |
| Does filing only apply to certain territory (territorie No | s) or certain classes? If so, specif | ÿ:
 |
| Brief description of filing. (If filing follows rates o | for advisory organization granif | v organization): |
| Changes to the current program are being made in order to sin | | |
| revenues, number of professional and area of practice; and to | bring more consistency to the rating proc | ess. |
| | | |
| * A directed to reflect all prior rate changes | | |

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

New Hampshire Insurance Company

Name of Company

Official-Title

SUBSTITUTE FORM (RF-3)

SUMMARY SHEET

Owners Insurance Company

Change in rate level produced by rate revisions effective March 14, 2014 for New Business and May 13, 2014 for Renewal Business.

| | (2) | (3) |
|--------------------------------|--------------------------------------|--------------|
| | Annual Premium | Percentage |
| <u>Coverage</u> | <u>Volume (Illinois)¹</u> | |
| 15. Other: Personal Farmowners | \$1,119,289 (est.) | +6.4% (est.) |

This filing applies to Farmowners policies in the State of Illinois.

The following is a description of all changes affecting rates with this filing:

Modify Base Rates, Minimum Premiums, Paid Loss Surcharge, Age of Insured Relativities, Amount of Insurance Relativities, Protection Class Relativities, Territory Relativities, Age of Construction Discount, Deductible Relativities, Custom Insurance Score Relativities, Earthquake Rates, Replacement Cost Household Personal Property Rates, Claim Free Discount, Experience Discount, Coverage G Rates, Coverage H Rates,

Introduce Wind/Hail Deductible Options.

Introduce a cosmetic damage discount for a total discount of 20% for farm outbuildings and grain bins, 12% for metal roof material, and 8% for all steel or metal/pole siding construction.

Introduce loss settlement Actual Cash Value Roof relativities.

¹Adjusted to reflect all prior rate changes.

²Change in premium level which will result from application of new rates.

Owners Insurance Company

Name of Company

Official - Title

| 3. 4. 5. | Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto | Volume (Illinois)* | <u>Change (+ or -)**</u> |
|----------|---|---|------------------------------|
| 3. 4. 5. | Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial | | <u> </u> |
| 3. 4. 5. | Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial | | |
| 3. 4. 5. | Automobile Physical Damage
Private Passenger
Commercial | | |
| 3. 4. 5. | Private Passenger
Commercial | | |
| 4 | Commercial | | |
| 4 | | | |
| 4 | Linkility Other Then Auto | | |
| 5. | Liability Other Than Auto | | |
| | Burglary and Theft | | |
| 6. | Glass | | |
| ٠ | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| | Extended Coverage | | |
| 1. | Inland Marine | | |
| 2. | Homeowners | | |
| | Commercial Multi-Peril | | |
| | Crop Hail | | |
| 5. | Other Platinum Shield | \$566,746 | N/A |
| | Line of Insurance | | |
| 0.11 | | | |
| | ng only apply to certain territory (to | erritories) or certain classes? If so, specify: | |
| 0 | | | |
| | | | |
| | | | |
| | | rates of an advisory organization, specify of | |
| | | ze ISO's new protection classes (1X-8X, 1Y | |
| ne Fire | Protection rule. The threshold for | a chargeable claim in regards to the Claim S | urcharge rule was increased |
| om \$2 | 250 to \$500. "Additional Living Ex | pense" was added to the list of claims that s
. An editorial change was also made. | hould be disregarded for the |
| дани г | rice Discount and Claim Surcharge | . An editorial change was also made. | |
| | | | |
| | | | |
| ۸ ۵:۰۰ | usted to reflect all prior rate change | | |

Shelter Mutual Insurance Company
Name of Company

Brian Marcks, Coord Ins Dept Affairs Official - Title

| | Change in Company's premium or rate | e level produced by rate revision effective | 5-15-2014 |
|---------|--|--|---------------------------------------|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| • | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger
Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Mobile Homeowners | \$379,461 | -0.05% |
| | Line of Insurance | | |
| D | | rritories) or certain classes? If so, specify: | |
| no | ning only apply to certain territory (te | mitories) of certain classes? If so, specify. | |
| 110 | | | |
| | | | · · · · · · · · · · · · · · · · · · · |
| Brief (| description of filing (If filing follows | rates of an advisory organization, specify of | organization): |
| | | the ISO's new protection classes (1X-8X, 1Y | |
| | | . The threshold for a chargeable claim in re | |
| Clair | n Surcharge rule was increased from \$ | 250 to \$500. "Additional Living Expense" | was added to |
| the li | st of claims that should be disregarded | for the Claim Free Discount and Claim Su | ırcharge. |
| | | | |
| | | | |
| | | | |

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

Shelter Mutual Insurance Company Name of Company

Brian Marcks, Coord Ins Dept Affairs Official - Title

| | Change in Company's premium or ra | te level produced by rate revision effective | 5-15-2014 |
|--------|---|---|----------------------------------|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | · · · · · · · · · · · · · · · · · · · | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Farmowners | \$528,277 | -0.05% |
| | Line of Insurance | | |
| Does t | filing only apply to certain territory (t | erritories) or certain classes? If so, specify: | |
| no | ining only upply to certain territory (t | ennones, en certain enasses. In se, apoenly. | |
| | | | |
| | | | |
| Brief | description of filing (If filing follow | s rates of an advisory organization, specify o | organization): |
| | | ize ISO's new protection classes (1X-8X, 1Y | |
| | | a chargeable claim in regards to the Claim S | |
| | | spense" was added to the list of claims that s | |
| | | e. An editorial change was also made. | and the desire gave and the same |
| | 8 | 8 | |
| | | | |
| | | • | |
| * A | djusted to reflect all prior rate change | es. | |
| | hange in Company's premium level w | | |
| | esult from application of new rates. | | |
| | 1 1 | | |

Shelter Mutual Insurance Company
Name of Company

Brian Marcks, Coord Ins Dept Affairs Official - Title Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate le | vel produced by rate revision effective | 03/01/2014 NB; 04/15/2014 REN |
|---|--|---|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| Automobile Liability Private Page 200 Communication | | |
| Passenger Commercial 2. Automobile Physical Damage | | |
| | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | · |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | 00.004.000 | 10.00/ |
| 15. Other Farmowners Line of Insurance | \$8,624,809 | +12.0% |
| | territories) or certain classes? If so, specify | /: <u>No</u> |
| | rates of an advisory organization, specify o | |
| | | |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level with | nich will result from application of new rate | s. |
| | State Farm | Fire and Casualty Company |
| | | Name of Company |
| | Karen Terry, As | sistant Vice President & Actuary Official – Title |
| | | Onicial – Title |

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

| (1) | (2) Annual Premium Volume (Illinois) * | (3) Percent |
|--|---|--------------------------|
| Coverage Automobile Liability Private | - Volume (Illinois) * | Change (+or-) ** |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | | |
| Commercial | | <u></u> |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other General Liability | 3,178 | -9.9% |
| Line of Insurance | | |
| Does filing only apply to certa Classes? If so, | ain territory (territories) or | certain |
| specify: No. | | |
| Brief description of filing. (If | filing follows rates of an ac | lvican |
| Differ describation of filling. (if | ining lonows rates of all at | IVISOI y |
| , , , | | |
| Organization, specify | We are filing to adopt ISO | reference filing |
| Organization, specify organization): | We are filing to adopt ISO cost multiplier. | reference filing |
| Organization, specify | | reference filing |
| Organization, specify organization): GL-2013-BGL1 and to change our loss *Adjusted to reflect all prior rate of the change in Company's prenticed. | cost multiplier. ate changes. | |
| Organization, specify organization): GL-2013-BGL1 and to change our loss | cost multiplier.
ate changes.
nium level which will result | t from application of ne |
| Organization, specify organization): GL-2013-BGL1 and to change our loss *Adjusted to reflect all prior re **Change in Company's pren | cost multiplier. ate changes. nium level which will result State National Insu | |